

DECLARATION AND POWER OF ATTORNEY

USA/PCT

As a below named inventor, I hereby declare that:

- (a) My residence and Citizenship are as stated below my name. My P.O. (mailing) address is the same as my residence unless otherwise stated.
- (b) I verily believe I am/we are the original, first and sole/joint inventor(s) of the subject matter that is embraced by and for which a patent is sought on the invention entitled: **MOLDING COMPOUND**
and the specification of which: ☐ is attached hereto (____).
(check one) ☒ was filed on November 26, 2003 as (62806A).
Application No. 10/723,096
and was amended on _____

- (c) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.
- (d) I acknowledge my duty under 37 CFR 1.56 to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56(b). If this application is a continuation-in-part application, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in 37 CFR 1.56(b) that became available between the filing date of the prior application from which priority is claimed in part (f) below, and the national or PCT international filing date of this application.
- (e) I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate listed below or §365(a) of any PCT international application that designated at least one country other than the United States of America listed below, and also identify below any other foreign equivalent application for patent or inventor's certificate or any other equivalent PCT international application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)			PRIORITY CLAIMED	CERTIFIED COPIES INCL.
Number	Country or PCT	Day/Month/Year Filed	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Additional claims for benefit are attached.				

- (f) I hereby Claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below, or under 35 U.S.C. §120 of any United States application(s), or under § 365(c) of any PCT international application designating the United States of America listed below:

US or PCT Appln. Serial No.	Filing Date	Status at Application Filing Date
<u>60/436,295</u>	<u>12/23/2002</u>	<u>Pending</u>
<input type="checkbox"/> Additional claims for benefit are attached.		

I hereby appoint the attorney(s) and/or agent(s) at the following Customer No. to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Address all correspondence to appointed counsel at: 25215

25215

This appointment, including the right to delegate this appointment, shall also apply to the same extent it is applicable under the laws of the United States of America to any proceedings established by the Patent Cooperation Treaty.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor(s):

At: South Charleston, West Virginia
this 6th day of April, 2004

Signature: John E. Kendall
Full Name: John E. Kendall
Residence: 4 Cook Drive
Charleston, West Virginia 25314
Country: United States of America
Citizenship: United States of America
P. O. Address: Same as Residence

At: South Charleston, WV
this 24 day of March, 2004

Signature: Robert L. Seats
Full Name: Robert L. Seats
Residence: 110 Hawksbury Trace
Beckley, West Virginia 25801
Country: United States of America
Citizenship: United States of America
P. O. Address: Same as Residence

At: _____
this ____ day of _____, 20__

Signature: _____
Full Name: _____
Residence: _____

Country: _____
Citizenship: _____
P. O. Address: _____

At: _____
this ____ day of _____, 20__

Signature: _____
Full Name: _____
Residence: _____

Country: _____
Citizenship: _____
P. O. Address: _____

☒ Additional names and signatures are attached.

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<input type="checkbox"/>	Additional claims for benefit are attached.		<input type="checkbox"/>	<input type="checkbox"/>

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Inventor(s):

At: _____
 this ____ day of _____, 20____

Signature: _____
 Full Name: _____
 Residence: _____

Country: _____
 Citizenship: _____
 P. O. Address: _____

At: _____
 this ____ day of _____, 20____

Signature: _____
 Full Name: _____
 Residence: _____

Country: _____
 Citizenship: _____
 P. O. Address: _____

At: Farmington, GA
 this 4 day of April, 2004

Signature: Gary C. Rex
 Full Name: Gary C. Rex
 Residence: 1812 Oakwood Drive 318 North Brooke Dr. Canton, GA 30114
Sissonville, West Virginia 25320
 Country: United States of America
 Citizenship: United States of America
 P. O. Address: Same as Residence

At: _____
 this ____ day of _____, 20____

Signature: _____
 Full Name: _____
 Residence: _____

Country: _____
 Citizenship: _____
 P. O. Address: _____

☒ Additional names and signatures are attached.

